

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470 email: ethics@hawaiiethics.org Web site: www.hawaii.gov/ethics

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STATE ETHICS COMMISSIDI:

	(Type or Prin	nt Clearly)	STATE ETHIUS CUMMISSIJA
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Stephen	Jane		(415) 389-6800
MAILING ADDRESS (Street)			FAX (415) 388-6874
c/o Nielsen Merksamer, et al., 2350 Kerner Blvd., Ste. 250			EMAIL jskelton@nmgovlaw.com
(City)	(State)		(Zip Code)
San Rafael	CA		94901
EMPLOYING ORGANIZATION (F)	Il in only if you are employed by a business entity	which has been retained to	o lobby) TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
			The state of the s

PART II ORGANIZATIO	<u>N</u>	
NAME OF ORGANIZATION YOU	TELEPHONE	
Allergan, Inc.	(415) 389-6800	
MAILING ADDRESS (Street)	FAX (415) 388-6874	
c/o Nielsen Merksamer, et al., 2350 Kerner Blvd., Ste. 250		EMAIL jskelton@nmgovlaw.com
(City)	(State)	(Zip Code)
San Rafael	CA	94901
NAME OF PERSON RESPONSIBLE	TELEPHONE	
Jennie Unger Skelton, D	(415) 389-6800	
MAILING ADDRESS (Street)	FAX (415) 388-6874	
c/o Nielsen Merksamer, et al., 2350 Kerner Blvd., Ste. 250		EMAIL jskelton@nmgovlaw.com
(City)	(State)	(Zip Code)
San Rafael	CA	94901

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
☐ Agriculture	Education	Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	C Tourism & Recreation			
Consumer Profection & Commerce	Hawaiian Affairs	☐ Labor & Employment	☐ Transportation			
Culture, Arts, Historic Preservation	☑ Health	Planning, Land & WaterUse Management	Other: (indicate below)			
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections				
						
PART IV CERTIFICATIO	N OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
Not supposed and the information raphic above to, to the best of my knowledge, contest and complete.						
Jane Stephen 12-27-2012						
(Signature of Lobbyist) (Date)						
PART V AUTHORIZATION TO LOBBY						
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
Jennie Unger Skelton	Designated Agent for Filer					
NAME OF ORGANIZATION (if an	oplicable)		TELEPHONE			
Allergan, Inc.	,		(415) 389-6800			
MAILING ADDRESS (Street)			FAX (415) 388-6874			
c/o Nielsen Merksamer, et al., 2350 Kerner Blvd., Ste. 250			EMAIL jskelton@nmgovlaw.com			
(City)	(State)		(Zip Code)			
San Rafael	CA		94901			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
,	MSM		1.4.12			
(Signature of Au	thorizing Officer or Person Repre	sented)	(Date)			

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